

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

9437.15

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			35					RATE	FEE]	RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	35 minus 20=		. 15			X\$ 9=	135.0	OR	X\$18=	
IND	EPENDENT CL	AIMS	6 minus 3 =		* 3			X40=	12000	1	X80=	_
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	100	OR	+270=	
* If the difference in column 1 is less than zero, enter						olumn 2			61000	OR	TOTAL	
	C	LAIMS AS A	MENDE	- PAR	ΤII				0100	,	OTHER	THAN
(Column 1)			(Colum			(Column 3)		SMALL	ENTITY	OR .	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	1.71-7	=]	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***]=] [X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDEN	T CLAIM		ا ا	+135=		OR	+270=	
							l	TOTAL		ı	TOTAL	
								ADDIT. FEE	<u> </u>	OR	ADDIT. FEE	
		(Column 1) CLAIMS		(Colu		(Column 3)) 7 .				,	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	-	=] [X\$ 9=		OR	X\$18=	
	Independent	PRESENTATION OF MULTIPLE DEPENDENT CLA			=	╽╽	X40=		OR	X80=		
L	FIRST PRESE	NTATION OF MU	JETIPLE DEF	PENDENT	CLAIM		 	+135=		OR	+270=	
							i	TOTAL			TOTAL	
(Column 1) (Column 2) (Column 2)								ADDIT. FEE		Jon	ADDIT. FEE	
		(Column 1) CLAIMS		HIGH		(Column 3)	, 	· · · · · · · · · · · · · · · · · · ·			/-··	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA	╽╽	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		[=	<u></u>	X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEPENDENT		T CLAIM	1				υr		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nurr	ber Previously Pai	id For" (Total o	r Independ	lent) is the	highest number	er fou	nd in the app	propriate box	in col	lumn 1.	